

**DECLARATION FOR U.S. PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

**REAGENT FOR LACRIMATION EXAMINATION AND METHOD OF LACRIMATION****EXAMINATION**

the specification of which is attached hereto unless the following is checked

☒ was filed on **January 11, 2005** as United States Application Number \_\_\_\_\_ or PCT International Application Number **PCT/JP2005/000202** and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment referred above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 (a) – (d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application for which priority is claimed.

(List prior foreign applications. See note A)

**Priority Claimed**

<b>2004-008808</b> (Number)	<b>Japan</b> (Country)	<b>16/01/2004</b> (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>2004-324327</b> (Number)	<b>Japan</b> (Country)	<b>08/11/2004</b> (Day/Month/Year Filed)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No

(See note B below)

☐ See attached list for additional prior foreign applications

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

(List prior U.S. Applications)

**Status**

☐ Patented ☐ Pending ☐ Abandoned

Abandoned

☐ Patented ☐ Pending ☐ Abandoned

Abandoned

(Application Serial No.)

(Filing Date)

☐ Patented ☐ Pending ☐  
Abandoned

(Application Serial No.)

(Filing Date)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Customer Number

23850

PATENT TRADEMARK OFFICE

Please direct all communications to the following address:

Customer Number

23850

PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18 of the United States Code, § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

(See note C)

Full name of sole or first inventor (given name, family name)

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Date

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## NOTES

- A. Please list all foreign applications relating to the invention and check block "yes" or "no".
- B. If more than 4 prior foreign applications, please check this box and attach a sheet listing the remaining prior foreign applications.
- C. For residence in the U.S., indicate city and state, for residence outside the U.S., indicate city and country. The "Post Office Address" must be an address acceptable by a Post Office for delivery of mail.